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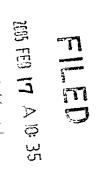
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## TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 ZELJKA INC SUBJECT: Proposed corporate name-must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: T \$78.75 \$87.50 \$70.00 Filing Fee \$78.75 Filing Fee Filing Fee Filing Fee, & Certified Copy Certified Copy & Certificate of Status & Certificate of Status ADDITIONAL COPY REQUIRED ZELJKO ANIC FROM: Name (Printed or typed) 3800 UNIVERSITY BLVD S APT 95 Address JACKSONVILLE, FL 32207

NOTE: Please provide the original and one copy of the articles.

City, State & Zip

Daytime Telephone number

(603)321-8925

## **Articles of Incorporation**

The undersigned incorporator for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME
The name of the corporation shall be:

**ZELJKA INC** 

ARTICLE II PRINCIPLE OFFICE

The principle place of business & mailing address of this corporation shall be:

3800 UNIVERSITY BLVD S APT 95 JACKSONVILLE, FL 32207

ARTICLE III PURPOSE

The purpose for which the corporation os organized is:

LOUNGE

ARTICLE IV SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List names, address, & specific titles:

ZELJKO ANIC PRESIDENT 3800 UNIVERSITY BLVD S APT 95 JACKSONVILLE, FL 32207

<u>ARTICLE VI REGISTERED AGENT</u>

The name & Florida street address of the initial registered agent is:

ZELJKO ANIC 3800 UNIVERSITY BLVD S APT 95 JACKSONVILLE, FL 32207

ARTICLE VII INCORPORATOR

The name & address of the incorporator to these Articles of Incorporation is:

ZELJKO ANIC 3800 UNIVERSITY BLVD S APT 95 JACKSONVILLE, FL 32207

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I furthur agree to comply with the provisions of all statutes relating to the proper and complete performance of my`duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Date